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PTO/SB/21 (09-04)

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TRANSMITTAL FORM

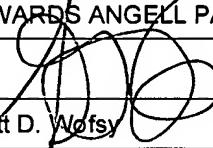
(To be used for all correspondence after initial filing)

TRANSMITTAL FORM <i>(To be used for all correspondence after initial filing)</i>		Application Number 10/559,523 Filing Date December 6, 2005 First Named Inventor Bernhard Hug Art Unit N/A Examiner Name Not Yet Assigned
Total Number of Pages in This Submission 		Attorney Docket Number 64512(49338)

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Supplemental IDS with Form PTO-1449 <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <div style="margin-left: 20px;">Return Receipt Postcard</div>
		Remarks <div style="border: 1px solid black; padding: 2px; width: 100%;">Return Receipt Postcard, postage prepaid.</div>

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	EDWARDS ANGELL PALMER & DODGE LLP		
Signature			
Printed name	Scott D. Wofsy		
Date	April 17, 2006	Reg. No.	35,413

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the U.S. Postal Service on the date shown below with sufficient postage as First Class Mail, in an envelope addressed to: MS Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Dated: April 17, 2006

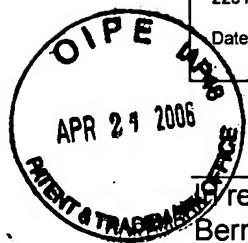
Signature: Edith Sillman (Edith Sillman)

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the U.S. Postal Service on the date shown below with sufficient postage as First Class Mail, in an envelope addressed to: MS Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Dated: April 17, 2006

Signature: Edith Sillman
(Edith Sillman)

Docket No.: 64512(49338)
(PATENT)



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Re Patent Application of:
Bernhard Hug et al.

Application No.: 10/559,523

Confirmation No.: N/A

Filed: December 6, 2005

Art Unit: N/A

For: ELECTROSURGICAL INSTRUMENT FOR
AN ENDOSCOPE OR A CATHETER

Examiner: Not Yet Assigned

SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT (IDS)

MS Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

In accordance with 37 CFR 1.97, Applicant(s) hereby make of record the following additional documents. A Form PTO-1449 and a full copy of each of the documents required under 37 CFR 1.98(a)(2) accompany this statement.

Applicant(s) have become aware of the following documents during prosecution of the priority application No. DE 103 27 237.2-35, which corresponds to the above referenced application, and in accordance with 37 CFR 1.97(c) and (e)(1) or (b)(3), hereby submit(s) these documents for the Examiner's consideration. These documents are cited on the enclosed Form PTO-1449, and a copy of each document required under 37 CFR 1.98(a)(2) cited thereon is enclosed as well.

This statement is not to be interpreted as a representation that the cited documents are material, that an exhaustive search has been conducted, or that no other relevant information exists. Nor shall the citation of any document herein be construed *per se* as a representation that such document is prior art. Moreover,

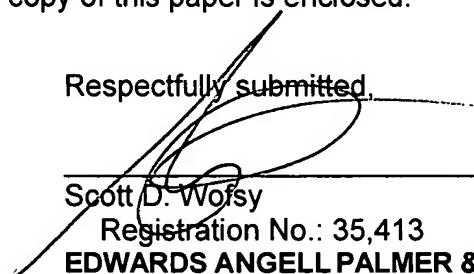
Applicant(s) understand(s) the Examiner will make an independent evaluation of the cited documents.

This Information Disclosure Statement is filed before the mailing date of a first Office Action on the merits as far as is known to the undersigned (37 CFR 1.97(b)(3)).

The Director is hereby authorized to charge any deficiency in the fees filed, asserted to be filed or which should have been filed herewith (or with any paper hereafter filed in this application by this firm) to our Deposit Account No. 04-1105, under Order No. 64512(49338). A duplicate copy of this paper is enclosed.

Dated: April 17, 2006

Respectfully submitted,



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PTO/SB/08a/b (07-05)

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Substitute for form 1449A/B/PTO				Complete if Known	
				Application Number	10/559,523
				Filing Date	December 6, 2005
				First Named Inventor	Bernhard Hug
				Art Unit	N/A
				Examiner Name	Not Yet Assigned
Sheet	1	of	1	Attorney Docket Number	64512(49338)

U.S. PATENT DOCUMENTS					
Examiner Initials*	Cite No. ¹	Document Number	Publication Date	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		Number-Kind Code ² (if known)	MM-DD-YYYY		
AA	US Patent 4,781,175	11.01.1988	McGreevy et al.		
AB	US Patent 5,720,745	02.24.1998	Farin et al.		

FOREIGN PATENT DOCUMENTS					
Examiner Initials*	Cite No. ¹	Foreign Patent Document	Publication Date	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		Country Code ³ -Number ⁴ -Kind Code ⁵ (if known)	MM-DD-YYYY		
BA	EP 0 765 638 A1	04.02.1997	Erbe Elektromedizin GmbH		
BB	DE 195 35 811 C1	04.24.1997	Erbe Elektromedizin GmbH		
BC	DE 91 17 299 U1	03.23.2000	Erbe Elektromedizin GmbH		

*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. ¹ Applicant's unique citation designation number (optional). ² See Kinds Codes of USPTO Patent Documents at www.uspto.gov or MPEP 901.04. ³ Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). ⁴ For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. ⁵ Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST.16 if possible. ⁶ Applicant is to place a check mark here if English language Translation is attached.

NON PATENT LITERATURE DOCUMENTS					
Examiner Initials	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.			

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¹Applicant's unique citation designation number (optional). ²Applicant is to place a check mark here if English language Translation is attached.

Examiner Signature 208863		Date Considered	
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